

Grant Delivery System (GDS) - WebGrants High School System Administrator's Access Request Form



A signed Information Security and Confidentiality Agreement must be received and approved by the California Student Aid Commission prior to accessing the GDS - WebGrants system.

I. High School Section

High School Name			
High School Address	City	State	Zip Code
College Board Code	CDS Code		
WASC Accreditation Code (or other eligible regional accreditation code)	Accreditation Association Contact Information (if other than WASC)		

II. Personal Information Section (to be completed by person requesting access)

Name (Last, First, Middle Initial)		
Special Identifier (Check only one; limited to nine alpha-numeric characters maximum)		
<input type="checkbox"/> SSN	<input type="checkbox"/> Pet's name	
<input type="checkbox"/> Mother's maiden name	<input type="checkbox"/> Other	_____
<i>I certify that I have received and reviewed all security and confidentiality policies pertaining to the use of the Commission's GDS – WebGrants System.</i>		
Signature	Title	Date
_____	_____	_____
Email Address (Required)	Phone Number (____) ____ - ____	Fax Number (____) ____ - ____

III. Access Request and High School Certification Section (to be completed by PRINCIPAL verifying access)

Date Request Submitted			
New <input type="checkbox"/>	Change <input type="checkbox"/>	Delete <input type="checkbox"/>	User ID
<i>I certify that I am the High School's Principal and that I have designated the above named employee as our System Administrator for the GDS - WebGrants System.</i>			
Name of Principal - print or type		Telephone Number (____) ____ - ____	
Signature of Principal		Fax Number (____) ____ - ____	
		Email Address _____	

How to fill out the System Administrator's Access Request Form

This form is required for the high school's System Administrator.
It is to be certified by the High School Principal and returned to the Commission.

I. High School Section:

- Fill in the high school's name, address, city, state, and College Board code, CDS code and WASC Accreditation and/or Accreditation Association Contact information.

II. Personal Information Section:

- Enter Last and First Name and Middle Initial of the System Administrator requesting access.
- Requesting System Administrator must enter a unique 9 (maximum) alpha-numeric character **special identifier**, which will be used to verify the identification of the person needing access. Special identifiers may be your SSN, your mother's maiden name, your pet's name or other such as your driver's license number. It is imperative that the System Administrator retain a copy of this completed form for their records.
- Each System Administrator must sign the form and certify that all security and confidentiality policies have been received and reviewed.

III. Access request and High School Certification Section:

- Provide the date the form was completed.
- Check the appropriate box:

New access – Once approved and processed, the new ID will be mailed directly to the System Administrator. Secure passwords will be emailed to the System Administrator.

Change existing access

Delete access

For request types of **Change** and **Delete**, please provide the GDS - WebGrants system User ID (to be provided by the Commission upon approval) in the space provided.

NOTE: When calling the Help Desk for assistance, you must provide your Special Identifier to verify your identity. Passwords and IDs will NOT be released without this confirmation.

- Enter the name, telephone number, facsimile number and e-mail address of the high school's Principal verifying this request.
- The high school's Principal **MUST** sign the form.

NOTE: A high school's Principal and System Administrator may not be the same person.

Mail forms to:

California Student Aid Commission
Information Technology Services Division
Attn: CSAC HelpDesk
P.O. Box 419026
Rancho Cordova, CA 95741-9026

Retain a copy of this completed form.